ACLS

1. **Bradycardia with Pulse**
	1. **Assymptomatic:** monitor & observe
	2. **Symptomatic**
		1. **Atropine**: 0.5mg, Max:3mg (6 doses)
		2. **Chronotropic Therapy**
			1. **Trans-Cutaneous Pacing**
			2. **Dopamine**: 2mcg/kg/min
			3. **Epinephrine**: 2mcg/min
		3. **Refractory**
			1. **Trans-Venous Pacing**
			2. **Expert Consult**
2. **Tachycardia with Pulse**
	1. **Symptomatic**
		1. **Shock-Synchronized Cardioversion**
			1. **Narrow Regular**: 50-100J
			2. **Narrow Irregular**: 120-200J
			3. **Wide Regular**: 100J
			4. **Wide Irregular**: Defibrillate (200J Desynchronized)
	2. **Assymptomatic**
		1. **Narrow QRS** (<0.12 sec)
			1. **Regular:**
				1. Adenosine 6mg Push followed by NS Flush
				2. Repeat attempts 12mg Push
			2. **Irregular/Refractory**
				1. **Rate Control**

**Diltiazem** (Ca-Channel Blocker)

**Beta-Blockers** (Metoprolol)

* + 1. **Wide QRS**
			1. **Regular Monomorphic**
				1. **Adenosine:** 6mg Push
			2. **Refractory/Polymorphic/Irregular**
				1. **Anti-arrythmics**

**Amiodarone**:

150mg over 10min

Maintenance: 1mg/min for 6hrs.

 **Procainimide** (Do NOT use if Prolong-QT):

20-50mg/min until arrhythmia stops

Max: 17mg/kg

Maintenance: 1-4mg/min

**Sotalol** (Do NOT use if Prolong-QT):

20mg/min for 5min (100mg)

1. **Cardiac Arrest (Pulseless)**
	1. **VF/VT**
		1. **Continuous CPR until ROSC**
			1. **Shock**: 200J (120-200J) Biphasic, 360J Monophasic
			2. **IV Access**
		2. **After 2min CPR**
			1. **Shock**
			2. **Epinephrine** (Vasopressor): 1mg every 3-5min
				1. Vasopressin (Alternative): 40 Units for 1st & 2nd Dose
		3. **After 2nd 2min CPR**
			1. **Shock**
			2. **Amiodarone**:
				1. 1st dose: 300mg
				2. 2nd dose: 150mg
			3. **Identify Treatable Causes**
				1. 5 H’s & 5 T’s
	2. **Asystole/PEA**
		1. **Continuous CPR until ROSC**
			1. **IV Access**
			2. **Epinephrine**: 1mg every 3-5min
		2. **After 2min CPR**
			1. **Check if shockable**
				1. **If Shockable**

**Go to VT/VF**

* + - * 1. **If NOT Shockable**

**Identify Treatable Causes**